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UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 C.F.R. 1.53(b))

Attorney Docket No.		9319S-000728
First Inventor		Yasushi HAGA
Title	UNKNOWN	
Express Mail Label No.		EV 406 074 705 US (3/11/2004)

APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

- | | |
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| 1. <input type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17)
(Submit an original and a duplicate for fee processing) | 7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix) |
| 2. <input type="checkbox"/> Applicant claims small entity status.
See 37 CFR 1.27. | 8. Nucleotide and/or Amino Acid Sequence Submission
(if applicable, all necessary) |
| 3. <input checked="" type="checkbox"/> Specification [Total Pages <input type="text" value="18"/>]
(preferred arrangement set forth below)
- Descriptive title of the Invention <input type="checkbox"/>
- Cross References to Related Applications <input type="checkbox"/>
- Statement Regarding Fed sponsored R & D <input type="checkbox"/>
- Reference to sequence listing, a table, or a computer program listing appendix <input type="checkbox"/>
- Background of the Invention <input type="checkbox"/>
- Brief Summary of the Invention <input type="checkbox"/>
- Brief Description of the Drawings (if filed) <input type="checkbox"/>
- Detailed Description <input type="checkbox"/>
- Claim(s) <input type="checkbox"/>
- Abstract of the Disclosure <input type="checkbox"/> | 9. <input type="checkbox"/> Computer Readable Form (CRF) |
| 4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C.113) [Total Sheets <input type="text" value="6"/>]
5. Oath or Declaration [Total Pages <input type="text" value="18"/>] | b. Specification Sequence Listing on:
i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or
ii. <input type="checkbox"/> paper |
| a. <input type="checkbox"/> Newly executed (original or copy)
b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63 (d))
(for a continuation/divisional with Box 18 completed)
<input checked="" type="checkbox"/> DELETION OF INVENTOR(S)
Signed statement attached deleting inventor(s)
named in the prior application, see 37 CFR
1.63(d)(2) and 1.33(b). | c. <input type="checkbox"/> Statements verifying identity of above copies |
| 6. <input checked="" type="checkbox"/> Application Data Sheet. See 37 CFR 1.76 | ACCOMPANYING APPLICATIONS PARTS |
| | 9. <input type="checkbox"/> Assignment Papers (cover sheet & document(s)) |
| | 10. <input type="checkbox"/> 37 C.F.R. §3.73(b) Statement <input type="checkbox"/> Power of
(when there is an assignee) Attorney |
| | 11. <input type="checkbox"/> English Translation Document (if applicable) |
| | 12. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS
Citations |
| | 13. <input type="checkbox"/> Preliminary Amendment |
| | 14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503)
(Should be specifically itemized) |
| | 15. <input type="checkbox"/> Certified Copy of Priority Document(s)
(if foreign priority is claimed) |
| | 16. <input type="checkbox"/> Request and Non Publication under 35 U.S.C. 122
(b)(2)(B)(i). Applicant must attach form PTO/SB/35
or its equivalent. |
| | 17. <input type="checkbox"/> Other: _____ |

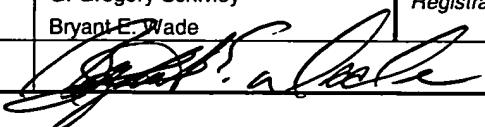
18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

Continuation Divisional Continuation-in-part (CIP)
Prior application information: Examiner _____ of prior application No: _____ / _____
Group / Art Unit: _____

For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

17. CORRESPONDENCE ADDRESS

<input checked="" type="checkbox"/> Customer Number or Bar Code Label		27572		or <input type="checkbox"/> Correspondence address below (Insert Customer No. or Attach bar code label here)	
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